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Hangar Flying Newsletter

A Publication of the McChord Field Retiree Activities Office for Air Force Retirees, their spouses and survivors. **Department of the Air Force, 100 Joe Jackson Blvd, Customer Service Mall Rm 1001, McChord Field WA 98438-1114; Phone (253) 982-3214 (Voice Mail 24 hours a day) Fax 253-982-5234. Email - retaffairs@us.af.mil Web Site www.mcchordrao.com Retiree Activities Office: Open 0900-1200 Monday – Friday**

House Votes for New Stolen Valor Act: WASHINGTON - Those who lie about military service or make false claims about receiving military medals with the intent of benefiting from those claims would be committing a crime under legislation passed by the House Wednesday.

The House's 410-3 vote on what is known as the Stolen Valor Act came less than three months after the Supreme Court struck down the original act on the grounds that it violated First Amendment free speech rights. The new bill attempts to get around the court ruling by making clear that it applies only in cases where people lie about a military record with the aim of obtaining payment or other benefits.

"Defining the intent helps ensure that this law will pass constitutional scrutiny while at the same time achieving its primary objective, which is to preserve and protect the honor and integrity of military service and awards," said the bill's sponsor, Rep. Joe Heck, R-Nev.

The bill states that those who misrepresent their military service with the intent of receiving something of value would be subject to up to one year in prison. Following the lines of the court ruling, it exempts from punishment those who simply wear military medals or decorations that do not belong to them.

The Supreme Court, in its 6-3 decision overturning the 2006 Stolen Valor Act in June, ruled that while lying about receiving military awards might be contemptible, it was protected by the First Amendment. Several justices, however, also noted that it was established that the government could restrict speech if it involved false claims made to obtain money or other benefits.

Even before the 2006 act, enacted at the height of the fighting in Iraq, it was a federal crime to wear unearned medals. But there was no law banning claims of being decorated.

Defense Secretary Leon Panetta, speaking at a House hearing a month after the court ruling, said the Pentagon was launching a new website listing the names of those who had received the Medal of Honor since the Sept. 11 terrorist attacks. He said the website could be expanded to include other recipients of military valor awards and medals.

The legislation now moves to the Senate, where Sen. Scott Brown, R-Mass., has introduced a companion bill. (Source: Sep 14, 2012 Associated Press| by Jim Abrams)

TRICARE and the Patient Protection and Affordable Care Act: TRICARE is a benefit established under law as the health care plan for the uniformed services members, retirees and their families. The Patient Protection and Affordable Care Act (PPACA), signed into law in 2010, brought changes in health care coverage for many Americans, but had no direct effect on the TRICARE benefit. TRICARE was not affected by PPACA because it is authorized by an independent set of statutes, and remains under sole authority of the Department of Defense and the Secretary of Defense.

Neither the passage of the PPACA nor the recent Supreme Court ruling upholding the PPACA directly impacted the TRICARE benefit. TRICARE provides coverage for preexisting conditions and serious illnesses; offers an array of preventive care services with no cost-shares; maintains reasonable out-of-pocket costs with no or low deductibles and copayments; and has no annual or lifetime caps on coverage.

One benefit addressed by the PPACA was coverage of young adults until reaching age 26. Although TRICARE did not previously have provisions for the young adult population, the National Defense Authorization Act, signed into law in January 2011, led to the speedy implementation of the TRICARE Young Adult (TYA) program. *(Continued on the next page)*

TYA gives eligible uniformed services dependents until reaching age 26 the option to purchase premium-based TRICARE coverage. As of May 31, 2012, more than 17,000 beneficiaries have signed up for TYA plans— 11,171 are in TYA Standard, and 6,407 in TYA Prime. For more information about TYA and how to purchase it, go to www.tricare.mil/tya.

More information about TRICARE and health care reform is available at www.tricare.mil. For more information about TRICARE's covered clinical preventive services www.tricare.mil/preventivecare. You may also sign up for automatic e-mail updates on TRICARE programs. (*Source: Tricare Standard Health Matters*)

TRICARE Prime enrollment fees increase Oct. 1: Prime enrollment fees for uniformed service retirees and their families will begin Oct. 1. Retirees who were enrolled before Oct. 1, 2011 will see a more significant increase since their enrollment fee remained at the 2011 levels of \$230 and \$460 per year when the fees increased last year.

The National Defense Authorization Act for fiscal 2012 allows for the annual increase of TRICARE Prime enrollment fees for most retired beneficiaries based on the annual cost-of-living adjustment. Exceptions to annual increases are for survivors of deceased active-duty sponsors and medically retired service members and their dependents.

Here's how the increase will affect beneficiaries enrolled before Oct. 1, 2011:

-- People now pay \$230 per year for individual coverage, and \$460 per year for family coverage. Beginning Oct. 1, individual coverage is \$269.28 per year, and family coverage is \$538.56 per year.

Beneficiaries enrolled on or after Oct. 1, 2011, including all new enrollments:

-- People now pay \$260 per year for individual coverage, and \$520 per year for family coverage. Beginning Oct. 1, individual coverage is \$269.28 per year, and family coverage is \$538.56 per year.

All TRICARE Prime enrollees are required to pay annual enrollment fees, except active-duty service and family members, transitional survivors, and beneficiaries younger than 65 with Medicare Parts A and B.

For more information, click [here](#). (Courtesy of TRICARE). (*Source: Air Force Retiree Services*)

TRICARE Benefit Remains Unchanged under new Contractor: Following the recent announcement that UnitedHealthcare Military & Veterans will replace TriWest Healthcare Alliance as the TRICARE West Region health care contractor, beneficiaries and health care providers have been asking how this change will affect them.

One thing doesn't change: the TRICARE benefit. TRICARE remains committed to providing the best possible health care for the 9.7 million military members, retirees and their families that use the benefit.

Beneficiaries currently using the TRICARE civilian health care networks are expected to find that most TriWest providers will also have agreements with UnitedHealthcare. If a provider change is needed, UnitedHealthcare will work with beneficiaries to find the right provider to ensure continuity of their health care. UnitedHealthcare shares TRICARE's commitment to provide superior service and health care to beneficiaries.

For details and the latest updates about the contract change, TRICARE Management Activity has created a website (www.tricare.mil/westtransition). By clicking the link at the top of that page, beneficiaries can sign up to receive email notifications as new information is posted to the TRICARE.mil website. Providers who visit the TRICARE website will be provided contact information for UnitedHealthcare.

During the contract transition period, TriWest continues to serve as the West Region health care contractor until the transition to UnitedHealthcare is complete beginning April 1, 2013. TRICARE's top priority is to ensure a smooth transition between UnitedHealthcare and TriWest for service members, retirees and their families.

The West Region is the last of the three regions to complete the transition to the T-3 contract. In the T-3 contract, some beneficiaries who reside 100 miles or more from an MTF or a civilian network primary care manager may not be able to continue their enrollment in TRICARE Prime. When the transition is complete, these beneficiaries may get their health care using TRICARE Standard or Extra. Standard and Extra are flexible and affordable plans giving beneficiaries a greater choice of providers with no referrals, and a waiver of cost-shares for most preventive health care services. (*Source: Tricare Communications*)

Why Vaccinate? The human immune system is designed to protect us from infection. When a germ (virus or bacteria) enters the body, the immune system recognizes the germ should not be there and sends antibodies to fight it. Additionally, the immune system remembers the germ. If the same germ enters the body again, antibodies are quickly deployed to get rid of it before it can make the person sick. When a person gets an infectious disease once, immunity develops and wards off future infection with the same disease. There is only one problem with this efficient system: The first time a child is exposed to a disease, his or her immune system may not create antibodies quickly enough to keep the child from getting sick. In other words, a child has to be sick from a disease before becoming immune to it. Fortunately, vaccines make it possible to build immunity to a disease without getting sick from it. Vaccines contain the same germs that cause diseases, but they have been killed or weakened to the point where they will not make a person sick. When a child is vaccinated, the immune system produces antibodies exactly like it would if the child were exposed to the germs. The child develops immunity without getting sick. Medicines treat or cure infections, while vaccines prevent them. There are currently 16 diseases that children from birth to age 19 can be protected against by getting vaccinated. Vaccines are effective and safe. Most children will not have any reaction to a vaccination. For those who do, the reaction is usually minor—a sore leg, a slight rash or a mild fever that goes away within a day or two. Vaccines and other clinical preventive services covered by TRICARE are offered at no cost to TRICARE Standard beneficiaries. You may receive vaccinations from TRICARE-authorized providers or from participating retail network pharmacies. Before you travel overseas, check if any vaccinations are recommended for your destination and whether TRICARE covers those vaccines. For more information and to view a schedule of immunizations, visit the “Vaccines & Immunizations” home page of the Centers for Disease Control and Prevention’s website at www.cdc.gov/vaccines. For more information about TRICARE coverage of vaccines, visit www.tricare.mil/immunizations.

Get Your Flu Vaccine: TRICARE recommends that all beneficiaries get the flu vaccine, especially these groups of people who are at a higher risk of getting the flu:

Pregnant women

People who live with or care for children younger than 6 months

Health care and emergency medical services personnel

Everyone between the ages of 6 months and 24 years

People ages 25–64 with chronic health disorders or compromised immune systems

Older people with diabetes, cardiovascular disease, asthma or HIV

For more information visit www.tricare.mil/flu . (Source: *Tricare Standard Health Matters*)

JBLM Fort Lewis: The **Lewis Army Museum** is expanding its limited opening to Thursdays, Fridays and Saturdays, from noon to 4 p.m. Admission: **FREE**. During the limited expanded opening, visitors will have access to:

Main Lobby Exhibits

Friends of the Museum Gift Store

Soldiers of the Pacific Northwest Gallery

The Army Family Gallery

The Vehicle Park

In addition to hosting the museum, this historic building now also houses a 15,000 square foot training facility on the once vacant third floor. The museum collects, preserves, and interprets material of historical significance to the installation and the military units which have served here. The museum also strives to foster an appreciation for the role that the United States Army played in the exploration, settlement and defense of the Pacific Northwest. Museum Information Line: (253) 967-7206. E-mail: lewisdptmsmuseum@conus.army.mil (Source: *The Lewis Army Museum*)

H.R. 1627 Improves VA Loans: On August 6, 2012 President Obama signed *The Honoring America's Veterans and Caring for Camp Lejeune Families Act* (H.R. 1627). The new law addresses some of the problems veterans have been facing recently including medical conditions caused by contaminated water used by families stationed at Camp Lejeune, North Carolina. The signed legislation also makes certain veterans benefits, like **VA loans**, more readily available. The new law makes VA loans available to more surviving spouses, disabled vets and single parents, and VA loan limits return to \$729,750 to over \$1,000,000 for high-cost areas.

The 5 Major VA Loan Changes:

1. Increased Eligibility for Surviving Spouses

Previously, surviving spouses became eligible for VA loans only if widowed by veterans who died on duty or from a service-connected disability. Now, a spouse who survives a veteran who dies of any cause may be eligible for VA home loan benefits as long as the veteran was a) continuously rated totally disabled for a period of time specified by the new law, and b) was eligible for VA disability compensation at the time of death.

2. More "Doable" Occupancy for Single Parents & Couples Serving Overseas

All VA borrowers must meet owner-occupancy requirements to qualify for the government-backed mortgage program. The new law makes it possible for single parents or married couples serving active duty away from home to satisfy the occupancy rule by having a dependent child with legal guardian or attorney-in-fact live in a house financed with a VA loan until the veteran is able to occupy the property.

3. ARMs and Hybrid ARMs Remain An Option

An Adjustable Rate Mortgage or ARM has traditionally been a great way for borrowers to enjoy an initial interest rate below the going average. The loans are especially beneficial to homeowners not planning on staying long, such as frequently reassigned military members. A previous law had VA ARMs and hybrid ARMs set to expire at the end of 2012. The two remain an option of the home loan program backed by the U.S. Department of Veterans Affairs. Qualified VA borrowers can continue to get these adjustable interest loans from VA-approved lenders that offer them.

4. Funding Fee Waiver Now Based on Pre-Discharge Disability Exam

Almost all borrowers pay a funding fee when taking out a VA loan. Traditionally, veterans with an official disability rating are given a waiver. The official rating can take a while after a pre-discharge disability examination is given. Veterans in limbo and closing on VA loans would have to pay the funding fee, then apply for a refund later when the official rating is given. Under the new law, a veteran may qualify for a funding fee waiver based on a qualifying pre-discharge disability rating or memorandum rating.

5. VA Loan Limits in High-Cost Areas Go Back Up

As a result of the Veterans Benefits Improvement Act of 2008 signed by President Bush, VA loan limits were raised in certain high-cost areas. But, Congress did not extend the higher limits for 2012, which resulted in a decrease to a top limit of \$625,500, even in expensive military towns like Prince William, Virginia. The H.R. 1627 law carries over the extension of the higher limits, up to over \$1,000,000 for pricier areas, through 2014. For more information on VA loan changes, visit va.gov. (Source: *Military.com Veterans Report*)

VA Benefits Safe from Budget Cuts: The White House released its 396-page report that details \$54.7 billion in Defense Department cuts in 2013 if Congress cannot agree on a deficit reduction plan to avoid sequestration by Jan. 2. The report details the 9.4 percent cuts in Defense Department discretionary spending. As promised by President Obama, funding for military personnel accounts, including pay, will not be subject to sequester cuts. Department of Veterans Affairs funding has also received an exemption. The White House did hedge in the report saying the estimates found in it are not final. (Source: *Military.com, Veterans Report*)

Pay to go Electronic by March 1st 2013: A US Treasury mandate will soon require (DFAS) to pay military, civilian and retired customers by electronic funds transfer. Beginning March 1, 2013, those of you who receive paper checks will receive your pay directly to your savings or checking accounts. You can get ahead of the rush by setting up direct deposit now. It's easy, it's safe and it gives you more control with less stress. With direct deposit, payment goes straight to your bank account. It gives you immediate access to your money the day your payment is due. It also eliminates the risk of lost or stolen checks, forged signatures and identity theft.

How to Start Direct Deposit

For those customers with a myPay account, simply log onto myPay at <https://mypay.dfas.mil/mypay.aspx> and enter your bank routing and account numbers. DFAS will require about a week before pay is deposited in your checking or savings account.

Military retirees and annuitants without a myPay account can complete the Fast Start Direct Deposit form at <http://www.fms.treas.gov/eft/2231.pdf> and send it to DFAS, U.S. Military Retired Pay, P.O. Box 7130, London, KY 40742-7130.

Former spouses of military retirees should complete a Direct Deposit Authorization (Form 1059) at <http://www.dfas.mil/dms/dfas/rapay/pdf/1059.pdf> and mail it to DFAS, Garnishment Operations, P.O. Box 998002, Cleveland, OH 44199-8002 if they do not have a myPay account.

Military members or civilian employees paid by DFAS should contact their base finance office, employer's Customer Service Representative (payroll liaison) or human resources office to start direct deposit if they're unable to access myPay. Those needing additional assistance can call DFAS customer service at 1-800-321-1080 (for retirees and annuitants) or 1-888-332-7411 (for military and civilian employees).

Advantages of Direct Deposit

1. On time: Checks sent through the mail take time to reach you. Foul weather, misrouted mail and other events can make your wait even longer. If your check becomes lost or stolen, that time increases as you wait for a replacement check and your bills go unpaid. Direct deposit eliminates the wait. Your money is in your bank account on pay day.
2. More secure: Your mailed check goes through a lot of hands before it reaches you. From printing to transport to your mail box, the more stops it makes the more opportunities there are for it to get lost or stolen. Even when you visit your bank to deposit it, your check can be handled by up to nine people before it is processed. Eliminate the risk and take control of your money. Direct deposit is a sure and easy way to do this.
3. More convenient: No need to drive to the bank to deposit your check means less gas and time. You'll have more time to enjoy the things you really like to do. And if you cash your check at a grocery or retail store, or if you use a check cashing service, direct deposit saves on fees you might otherwise pay.
4. Easy: Don't have a bank account? Find a bank or credit union in your area that is reputable and provides the services you need at little or no cost. And make sure they offer FDIC coverage of your account and accept direct deposit. It's the best way you can take control of your finances and protect yourself at the same time. Every year, DFAS spends over \$2 million dollars printing and mailing checks to the 1 percent of military members, retirees, DoD civilian employees and contractors who haven't yet made the switch. Each check costs \$1.04 while each electronic payment only costs 8 cents. During these difficult economic times, this money could be put to use directly supporting America's service men and women. Don't wait for March 1, 2013. Make the switch today! (*Source: Revet-Info*)